Customer Setup & Credit Application

Oil & Gas Industry Parts China Internal Use Only Approved Credit Limit \$
Approved by
Date of Approval
Approved Terms

Thank you for choosing to do business with Oil & Gas Industry Parts China! In order to effectively set you up as a customer, get you approved for credit (or credit card) payment and ensure that we effectively communicate with you, please fill out this form and send it to *Accounts @PioneerServiceInc.com* or fax it to 630-628-9343.

Requested Credit Limit: Credit Card	Payments Only?
SECTION 1: CUSTOMER SETUP INFORMATION (Required)	· · · · · · · · · · · · · · · · · · ·
Company Name:	Phone:
Billing Address:	Fax:
City, State, Zip:	Year Founded:
Accounts Payable Contact:	Email:
☐ Corporation ☐ S Corporation ☐ Partnership ☐ Proprietorship Principal(s)/Owner(s) for privately held companies: ☐ Corporation ☐ Partnership ☐ Proprietorship	
Controller Name: Mail	
SECTION 2: SHIPPING/PAPERWORK INSTRUCTIONS (Required)	
Receiving Contact: Email:	
Email BOL & Packing Lists to: Receiving Contact Other	er email:
Preferred Shipping Method: UPS Acct # Fedl	Ex Acct #
(Optional) Ship Freight Collect via	_ for shipments over pounds
Additional Shipping Instructions:	

SECTION 3: TRADE REFERENCES (May provide on separate letterhead. Please consider supplying companies that do not provide machined parts as your trade references.)

Trade Reference (1)		
Company Name:	Phone:	
Address:	Fax:	
City, State, Zip:	Email:	
Trade Reference (2)		
Company Name:	Phone:	
Address:	Fax:	
City, State, Zip:	Email:	
Trade Reference (3)		
Name:	Phone:	
Address:	Fax:	
City, State, Zip:	Email:	
SECTION 4: AGREEMENT (Required):		
We certify that our firm is financially sound and warrant that all true and accurate. We agree to pay Oil & Gas Industry Parts Othat a service charge of 1.5% per month will be assessed on a charge when billed. We understand that paying via credit card processing fee. All payments shall be made to Oil & Gas Indus 60101.	China invoices according to approved terms. We understand all past due invoices and we agree to pay such service beyond 10 days from the date of invoice will result in a 3%	
SIGNATURE:	URE: DATE:	
TITLE:		
PRINT NAME:		
Please fax or email this completed form to us along with	Trade References on company letterhead (if section 3	

is not filled out).

For faster service and/or convenience, you may choose to pay by credit card. Please fax or email this form. If trade references are not provided, then a deposit of up to 100% of the order value may be required.

CREDIT CARD PAYMENTS		
	We prefer to pay by credit card. A minimum 30% deposit plus any tooling charges, will be charged at the time of order acceptance and the balance at the time of shipment.	
	Send receipts to (name) at (email)	
	Name on credit card:	
	Billing Address (if different from above):	
	Credit Card Type: VISA MASTERCARD DISCOVER	
	Credit Card Number:	
	Expiration Date:	
	Security Code:	
	Note: Call 630-628-0249 x 2 if you prefer to provide some or all of this information via phone.	

Note: This form will be destroyed once information is entered in PayTrace, our credit card processing company.